2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093830

Entity Name: DRIFTWOOD POINT, LLC

FILED Feb 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2396 DRIFTWOOD POINT LANE CARRABELLE, FL 32322

Current Mailing Address: New Mailing Address:

3649 LETITIA LANE TALLAHASSEE, FL 32312

FEI Number: 20-3541952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WATKINS, STEVE M III 215 DELTÁ COURT TALLAHASSEE, FL 32303 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MGRM Title: MGRM () Delete (X) Change () Addition

CADE, JOHN CADE, JOHN P Name: Name: 3649 LETITIA LANE Address: 3649 LETITIA LANE Address:

City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM Title: () Delete () Change () Addition

Name: CADE, ROBIN Name: Address: 3649 LETITIA LANE Address: City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

PARTIN, LEONA PARTIN, RICHARD A Name: Name: 2909 LASSWADE DRIVE Address: Address: 2909 LASSWADE DRIVE City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete Title: () Change () Addition

Name: DETERS, SHERRY Name: Address: 3068 IRONWOOD DRIVE Address: City-St-Zip: TALLAHASSEE, FL 32309 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN P. CADE 02/15/2008